01-17-01

PTO/SB/05 (11-00)

Approved for use through 10/31/2002 OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

Please type a plus sign (+) inside this box

Attorney Docket No.

First Inventor SANJAY AGARWAL

NETWORK TRAFFIC BASED ADAPTIV

Title POWER MANAGEMENT SYSTEM ...

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No.

| APPLICA" | TION ELEMENTS | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Westwarten, DC 20231 | |
|--|--|---|--|
| See MPEP chapter 600 conc | erning utility patent application contents | Washington, DC 20231 | |
| 2. X Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Regal - Reference to serior a computer p - Background of the Brief Summary - Brief Description - Detailed Description - Claim(s) - Abstract of the | Imm (e.g., PTO/SB/17) Implicate for the processing) Implicate for the processing) Implicate for the processing) Implicate for the processing) Implications Implic | 7 CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>) 8. Nucleotide and/or Amino Acid Sequence Submission (<i>if applicable</i> , <i>all necessary</i>) a Computer Readable Form (CRF) b. Specification Sequence Listing on i. CD-ROM or CD-R (2 copies), or 11. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of (when there is an assignee) | |
| 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets | | | |
| The incorporation can only be | | vertently omitted from the submitted application parts. DENCE ADDRESS | |
| • Customer Number or Bar Co | | or X Correspondence address below | |
| Name | SANJAY AGARWAL CHIPSOL, Inc. | | |
| | 4702 CHEENEY STREET | | |
| Address | | 044 63 77 0 4 05054 | |
| City | SANTA CLARA | State CA Zip Code 95054 | |
| Country | USA 7 | elephone (408)727-5858 Fax(4)8)961-357 | |
| Name (Print/Type) | SANJAY AGARWAL | Registration No. (Attorney/Agent) | |
| Signature | 26 Agawal | Date 01/16/2001. | |

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 FEE TRANSMITTAL
for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

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| Co | mplete if Kr | nown | 2.0 |
|----------------------|--------------|---------|-----|
| Application Number | | - | - 2 |
| Filing Date | | | 98 |
| First Named Inventor | SANJAY | AGARWAL | Ĵζ |
| Examiner Name | | | |
| Group Art Unit | | | |
| Attorney Docket No. | | | |

| METHOD OF PAYMENT | FEE CALCULATION (continued) | | | |
|--|---|----------------------|--|----------|
| 1 The Commissioner is hereby authorized to charge | 3. ADDITIONAL FEES | | | |
| 1indicated fees and credit any overpayments to | Large Small | | | |
| Deposit Account | Entit | - | • | Fee Paid |
| Number | Fee Fee Code (\$) | Fee Fee Code (\$) | Fee Description | ree Paid |
| Deposit Account Name | 105 130 | 205 65 | Surcharge - late filing fee or oath | |
| Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17 | 127 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet | |
| | 139 130 | 139 130 | Non-English specification | |
| Applicant claims small entity status See 37 CFR 1 27 | 147 2,520 | 147 2,520 | For filing a request for ex parte reexamination | |
| 2. Payment Enclosed: Check Credit card Money Other | 112 920* | 112 920* | Requesting publication of SIR prior to Examiner action | |
| FEE CALCULATION | 113 1,840* | ¹ 113 1,840¹ | * Requesting publication of SIR after Examiner action | |
| 1. BASIC FILING FEE | 115 110 | 215 55 | Extension for reply within first month | |
| 1. BASIC FILING FEE Large Entity Small Entity | 116 390 | 216 195 | Extension for reply within second month | |
| Fee Fee Fee Fee Description | 117 890 | 217 445 | Extension for reply within third month | |
| Code (a) Code (b) | 118 1,390 | 218 695 | Extension for reply within fourth month | |
| 101 710 201 355 Utility filing fee 106 320 206 160 Design filing fee | 128 1,890 | 228 945 | Extension for reply within fifth month | |
| 107 490 207 245 Plant filing fee | 119 310 | 219 155 | Notice of Appeal | |
| 108 710 208 355 Reissue filing fee | 120 310 | 220 155 | Filing a brief in support of an appeal | |
| 114 150 214 75 Provisional filing fee | 121 270 | 221 135 | Request for oral hearing | |
| | 138 1,510 | 138 1,510 | Petition to institute a public use proceeding | |
| SUBTOTAL (1) (\$) 355 | 140 110 | 240 55 | Petition to revive - unavoidable | |
| 2. EXTRA CLAIM FEES | 141 1,240 | 241 620 | Petition to revive - unintentional | |
| Fee from Extra Claims below Fee Paid | 142 1,240 | 242 620 | Utility issue fee (or reissue) | |
| Total Claims 13 -20** = 0 X = | 143 440 | 243 220 | Design issue fee | |
| Independent 2 - 3** = 0 X == | 144 600 | 244 300 | Plant issue fee | <u> </u> |
| Multiple Dependent = | 122 130 | 122 130 | Petitions to the Commissioner | |
| | 123 50 | 123 50 | Processing fee under 37 CFR 1 17(q) | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description | 126 180 | 126 180 | Submission of Information Disclosure Stmt | |
| Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20 | 581 40 | 581 40 | Recording each patent assignment per property (times number of properties) | |
| 102 80 202 40 Independent claims in excess of 3 | 146 710 | 246 355 | Filing a submission after final rejection | |
| 104 270 204 135 Multiple dependent claim, if not paid | | | (37 ČFR § 1 129(a)) | |
| 109 80 209 40 ** Reissue independent claims over original patent | 149 710 | 249 355 | For each additional invention to be examined (37 CFR § 1 129(b)) | |
| 110 18 210 9 ** Reissue claims in excess of 20 | 179 710 | 279 355 | Request for Continued Examination (RCE) | |
| and over original patent | 169 900 | 169 900 | Request for expedited examination of a design application | |
| SUBTOTAL (2) (\$) 0 | Other fee (specify) | | | |
| **or number previously paid, if greater For Reissues, see above | *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0 | | | |

| SUBMITTED BY | | | Complete (if applicable) |
|-------------------|----------------|-------------------------------------|--------------------------|
| Name (Print/Type) | SANJAY AGARWAL | Registration No (Attoiney/Agent) | Telephone (408)727-5858 |
| Signature | 20 Regard | | Date 01/16/2001, |

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PTO/SB/06 (08-00)
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U. S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control numb Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) FOR NUMBER FILED NUMBER EXTRA RATE RATE FEE FEE \$ 355 BASIC FEE OR \$ (37 CFR 1.16(a) TOTAL CLAIMS 0 × minus 20 = OR 13 0 x \$ INDEPENDENT CLAIMS 2 0 minus 3 = * 0 OR (37 CFR 1.16(b)) 0 (37 CFR 1 16(d)) MULTIPLE DEPENDENT CLAIM PRESENT OR 355 TOTAL OR **TOTAL** * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING **PRESENT** NUMBER RATE TIONAL TIONAL RATE AMENDMENT **AFTER** PREVIOUSLY **EXTRA** FEE **FEE** Ar Hang AMENDMENT PAID FOR OR Total No 20 Minus = THE COLUMN (37 CFR 1 16(c)) OR Independent = Minus = (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d)) OR TOTAL TOTAL OR (Column 1) (Column 3) ADDIT. FEE ADDIT, FEE (Column 2) , E **CLAIMS** HIGHEST ADDI-ADDIm REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL R B R WANT H **AMENDMENT** AFTER PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR OR Total 2.5 3/4 3/4 Minus = (37 CFR 1 16(e)) OR *** Independent Minus (37 CFR 1 16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d)) OR TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING PRESENT NUMBER RATE TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA FEE** FEE AMENDMENT PAID FOR Total OR ale ale Minns = (37 CFR | 16(c)) OR Independent *** Minus = = (37 CFR 1 16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d)) = OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Pard For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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